

PTO/SB/17(6/99)

Approved for use through 09/30/2000. OMB 0651-0032

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DEMAS				FEE TRANSMITTAL FOR F			SEP - 7 2000		
				TOTAL AMOUNT OF PAYMENT (\$)	_\$3	00.00	3EP - 7 2000 1700 MAIL ROOM		
Comp	olete if Kn	own:				102	700 MAIL BOOM		
Appli	cation No.	_08	/939,18	5			MUUM KUUM		
Filing Date September 29, 1997									
			Goldschr	nidt, Iki et al.					
	Art Unit _								
	iner Name			500					
Attorn	ey Docket	No. <u>U4</u> 2	2390.P4	500					
METHOD OF PAYMENT (check one)									
1.	[X]			oner is hereby authorized to charge i ents to:	indicated	l fees and c	redit		
				nt Number <u>02-2666</u> nt Name					
	[X] Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17								
2.	<u>X</u>	Paymer	nt Enclo	osed:					
		<u>X</u>	Check						
				/ Order					
			Other						
FEE	CALCUL	ATION		·					
1.	BASIC F	ILING F	EE						
Large	Entity	Small E	ntity						
Fee	Fee	Fee	Fee						
Code	(\$)	Code	(\$)	Fee Description			Fee Paid		
101	690	201	345	Utility application filing fee					
106	310	206	155	Design application filing fee					
107	480	207	240	Plant filing fee					
108	690	208	345	Reissue filing fee					
114	150	214	75	Provisional application filing fee					
					SHE	TOTAL (1)	\$ 0.00		
					300	IOIAL (I)	\$ <u>0.00</u>		
2.	EXTRA	CL AIM E	EEC			Fee from			
2.	EXTRA	CLAIM F	<u>EE3</u>	Extra Claims		below	Fee Paid		
				<u> </u>		<u>below</u>	1 cc 1 alu		
	Claims			- 20** =	X		=		
	oendent (- 3** =	X		=		
	ple Depe						=		
				, if greater; For Reissues, see bel	ow.				
Large	Entity	Small E	ntity						
Fee	Fee	Fee	Fee						
Code	4.7	Code	(\$)	Fee Description					
103	18	203	9	Claims in excess of 20					
102	78	202	39	Independent claims in excess of 3					
104	260	204	130	Multiple dependent claim, if not paid		4 4			
109	78	209	39	**Reissue independent claims over			-4		
110	18	210	9	**Reissu claims in excess f 20 an	a vero	riginai pater	זנ		
					SU	BTOTAL (2)	\$ <u>0.00</u>		
FEE CALCULATION (continued)									
FEE	CALCULA	ALION (C	<u>continu</u>	<u>lea)</u>					

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PTO/SB/17 (6/99)

6				05			
3.	ADDITIO	NAL FEE	S	Fee Description			
Larg Entity Small Entity		ntity		RECEIVED			
F e	Fe	F	Fe	Co marshalle	MERCIAED		
C de		C de	(\$)	Fee Description	Feethaid 7 2000		
105	130	205	65	Surcharg - lat filing fee or ath	3EP=7 2000		
127	50	227	25	Surcharg - lat pr visi nal filing f e	TO 07-		
'-'				or cover sheet	TC 2700 MAIL ROOM		
139	130	139	130	Non-English specification			
147	2,520	147	2,520	For filing a request for reexamination			
112	920*	112	920*	Requesting publication of SIR prior to			
1				Examiner action			
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action			
115	110	215	55	Extension for response within first month			
116	380	216	190	Extension for response within second month			
117	870	217	435	Extension for response within third month			
118	1,360	218	680	Extension for response within fourth month			
128	1,850	228	925	Extension for response within fifth month			
119	300	219	150	Notice of Appeal	300.00		
120	300	220	150	Filing a brief in support of an appeal			
121	260	221	130	Request for oral hearing			
138	1,510	138	1,510	Petition to institute a public use proceeding			
140	110	240	55	Petition to revive unavoidably abandoned application			
141	1,210	241	605	Petition to revive unintentionally			
				abandoned application			
142	1,210	242	605	Utility issue fee (or reissue)			
143	430	243	215	Design issue fee			
144	580	244	290	Plant issue fee			
122	130	122	130	Petitions to the Commissioner	<u> </u>		
123	50	123	50	Petitions related to provisional applications			
126	240	126	240	Submission of Information Disclosure Stmt			
581	40	581	40	Recording each patent assignment per			
				property (times number of properties)			
146	690	246	345	For filing a submission after final rejection (see 37 CFR 1.129(a))			
149	690	249	345	For each additional invention to be examined			
1-3	030	243	3-3	(see 37 CFR 1.129(a))			
Other	r fee (speci	fy) _					
Other	r fee (speci	fy)					
	. .						
*Pod·	SUBTOTAL (3) \$ 300.00 *Reduced by Basic Filing Fee Paid						
			raiu				
SUBMITTED BY:							
Typed or Printed Name: Gordon R. Lindeen III							
Signature Add the Alkling to Date 8/3//00							
Reg. Number 33,192 Deposit Account User ID							
(complete if applicable)							
				EIRCT CLASS CERTIFIC	ATE OF MAILING		

FIRST CLASS CERTIFICATE OF MAILING (37 C.F.R. § 1.8 (a))

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	Arri		دافيا		
	Name of Person	Mailing Cor	respond	nce	
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	Signature		PTO/S	ate B/17 (6	/99)

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